

PART B - FEE(S) TRANSMITTAL

JAN 20 2005 JC 10
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022192 7590 11/10/2004

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HONOLULU, HI 96816

01/25/2005 CNGUYEN1 00000017 501260 10190014

01 FC:2501 700.00 DA
02 FC:1504 300.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/190,014	07/08/2002	Vincent Cheng	OR0210PR	3589

TITLE OF INVENTION: PBT COLLAR

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

W. Wayne Liauh	(Depositor's name)
<i>W. Wayne Liauh</i>	(Signature)
1/20/05	(Date)

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685	\$300	\$985	02/10/2005
EXAMINER	ART UNIT	CLASS-Subclass			
ALIMENTI, SUSAN C	3644	119-859000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

W. Wayne Liauh

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

1. _____

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Pronix Industries Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Taichung, TAIWAN

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies _____ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1260 (enclose an extra copy of this form).

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Authorized Signature *W. Wayne Liauh*

Date 1/20/05

Typed or printed name *W. Wayne Liauh*

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